Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 1 of 52

| B1 (Official Form 1)(04/13)   |  |  |   | <del>oannon</del>  | . a   | 90 - 0.  |  |  |  |  |
|---|--|--|---|--|---|--|--|--|--|--|
|   | United S<br>Nor                              |  |   | ruptcy (<br>of Illino  |   |  |  |  | Vol  | untary Petition  |
| Name of Debtor (if individual,<br>Johnson, Marilyn  | enter Last, First,                           | Middle):   |   |  | Name  | of Joint De  | ebtor (Spouse  | e) (Last, First  | , Middle):   |  |
| All Other Names used by the Do<br>(include married, maiden, and to<br>AKA Marilyn Johnson-Ad  | rade names):                                 | 3 years  |   |  |   |  | used by the J<br>maiden, and   |  |  | 3 years  |
| Last four digits of Soc. Sec. or I (if more than one, state all)  xxx-xx-0213   |  |  |   | plete EIN  | (if more  | than one, state  | all)   |  |  | D. (ITIN) No./Complete EIN   |
| Street Address of Debtor (No. a<br>418 E 62nd St; #3B<br>Chicago, IL  | nd Street, City, a                           | nd State):   | _   | ZIP Code   | Street  | Address of   | Joint Debtor   | r (No. and Su  | reet, City, a  | nd State):  ZIP Code   |
| County of Residence or of the F   | Principal Place of                           | Business:  |   | 60637  | Count   | y of Reside  | ence or of the   | Principal Pla  | ace of Busi  | ness:  |
| Mailing Address of Debtor (if d   | ifferent from stre                           | eet address  | s):   |  | Mailir  | ng Address   | of Joint Debt  | tor (if differe  | nt from stre   | eet address):  |
| Location of Principal Assets of (if different from street address   |  |  | Γ   | ZIP Code   | _   |  |  |  |  | ZIP Code   |
| Type of Debton  |  | <u> </u>   |   | of Business  |   |  | •  | -  |  | Under Which  |
| (Form of Organization) (Che Individual (includes Joint D See Exhibit D on page 2 of this □ Corporation (includes LLC a □ Partnership □ Other (If debtor is not one of the check this box and state type of                              | ebtors) form. and LLP) ne above entities,    | Single in 11 Railre Stock                                  | th Care Busile Asset Re<br>U.S.C. § 1<br>oad<br>obroker<br>modity Bro-<br>ring Bank | eal Estate as<br>101 (51B)   | defined   | Chapt Chapt Chapt Chapt Chapt Chapt  | er 7<br>er 9<br>er 11<br>er 12   | of<br>□ Cl<br>of   | hapter 15 P<br>a Foreign<br>hapter 15 P<br>a Foreign           | etition for Recognition Main Proceeding etition for Recognition Nonmain Proceeding |
| Chapter 15 Debte<br>Country of debtor's center of main<br>Each country in which a foreign proby, regarding, or against debtor is p  | interests:                                   | Debto  | Tax-Exe<br>(Check box<br>or is a tax-ex<br>Title 26 of                              | mpt Entity , if applicable empt organiza the United Sta l Revenue Coo  | ation<br>ites   | defined<br>"incurr   | are primarily co<br>d in 11 U.S.C. §<br>red by an indivi<br>onal, family, or | (Check<br>consumer debts,<br>§ 101(8) as<br>idual primarily          | for  | Debts are primarily business debts.  |
| Filing Fee  Full Filing Fee attached  Filing Fee to be paid in installm attach signed application for the debtor is unable to pay fee exce Form 3A.  Filing Fee waiver requested (application for the attach signed application for the | court's considerati<br>pt in installments. I | individuals<br>on certifyin<br>Rule 1006(b<br>7 individual | g that the b). See Office  Is only). Mu   | ial Check is Check at | ebtor is a sr<br>ebtor is not<br>f:<br>ebtor's aggr<br>e less than<br>ll applicable<br>plan is beir<br>cceptances | a small busing regate nonco \$2,490,925 (each boxes: no filed with of the plan w | debtor as definess debtor as ontingent liquidamount subject this petition.   | defined in 11 tage ated debts (except to adjustment) repetition from | C. § 101(51E<br>J.S.C. § 101(<br>cluding debts<br>on 4/01/16 o |  |
| Statistical/Administrative Info  ☐ Debtor estimates that funds ☐ Debtor estimates that, after a there will be no funds availa   | will be available<br>any exempt prope        | erty is exc  | luded and   | administrati   |   | es paid,   |  | THIS   | SPACE IS I   | FOR COURT USE ONLY   |
| Estimated Number of Creditors   | 200-   | ]<br>1,000-<br>5,000                                       | 5,001-<br>10,000  | 10,001-<br>25,000  | 25,001-<br>50,000   | 50,001-<br>100,000   | OVER 100,000   |  |  |  |
| Estimated Assets  \$0 to \$50,001 to \$100,000 \$500,000 \$100,000 \$500,000  | 1 to \$500,001 S<br>0 to \$1                 | \$1,000,001<br>to \$10<br>million                          | \$10,000,001<br>to \$50<br>million  | \$50,000,001<br>to \$100<br>million  | \$100,000,001<br>to \$500<br>million  | \$500,000,001<br>to \$1 billion  |  |  |  |  |
| Estimated Liabilities   | 1 to \$500,001 S<br>0 to \$1                 | \$1,000,001<br>to \$10<br>million                          | \$10,000,001<br>to \$50<br>million  |  | \$100,000,001<br>to \$500<br>million  | \$500,000,001<br>to \$1 billion  |  |  |  |  |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 2 of 52

Page 2 Name of Debtor(s): **Voluntary Petition** Johnson, Marilyn (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: ND IL 12-16362 4/23/12 Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Thomas P Twomey May 16, 2015 Signature of Attorney for Debtor(s) (Date) Thomas P Twomey 6273191 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

### **B1** (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Marilyn Johnson

Signature of Debtor Marilyn Johnson

X.

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

May 16, 2015

Date

#### Signature of Attorney\*

X /s/ Thomas P Twomey

Signature of Attorney for Debtor(s)

Thomas P Twomey 6273191

Printed Name of Attorney for Debtor(s)

Zalutsky & Pinski, Ltd.

Firm Name

111 W. Washington

Suite 1550

Chicago, IL 60602

Address

Email: admin@ZAPLawFirm.com

312-782-9792 Fax: 312-782-0483

Telephone Number

May 16, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Johnson, Marilyn

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

 $\mathbf{X}$ 

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s): Johnson, Marilyn

Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Whole Signature of Debtor Marlyn Johnson

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

May 16, 2015

### Signature of Attorney\*

Signature of Attorney for Debtor(s)

Thomas P Twomey 6273191 Printed Name of Attorney for Debtor(s)

Zalutsky & Pinski, Ltd.

Firm Name

111 W. Washington

Suite 1550

Chicago, IL 60602

Address

Email: admin@ZAPLawFirm.com

312-782-9792 Fax: 312-782-0483

Telephone Number

May 16, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Date

Printed Name of Foreign Representative

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person,or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

## Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 5 of 52

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont.   | ze 2  |
|---|-------|
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or me deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); | ental |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being   |       |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or   | r     |
| through the Internet.);   |       |
| ☐ Active military duty in a military combat zone.   |       |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.   |       |
| I certify under penalty of perjury that the information provided aboye is true and correct.   |       |
| Signature of Debtor: Marilyn Johnson  |       |
| Date: May 16, 2015  |       |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main

Document

Page 6 of 52

B6 Declaration (Official Form 6 - Declaration). (12/07)

## United States Bankruptcy Court Northern District of Illinois

| ın re | Martiyri Johnson   |                         | Case No.        |                              |
|-------|--|-------------------------|-----------------|------------------------------|
|       |  | Debtor(s)               | Chapter         | 7                            |
|       | <b>DECLARATION</b>   | CONCERNING DEBTO        | R'S SCHEDUL     | ES                           |
|       | DECLARATION UNDER  | PENALTY OF PERJURY BY   | ' INDIVIDUAL DE | BTOR                         |
|       | I declare under penalty of perjury sheets, and that they are true and correct to |                         |                 | les, consisting of <b>20</b> |
| Date  | May 16, 2015   | Signature Marilyn Johns | n Jikhs         | mJ                           |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 7 of 52

B7 (Official Form 7) (04/13)

7

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

|                                     | vers contained | in the foregoing statement of financial affairs and any attachments thereto |
|-------------------------------------|----------------|---|
| and that they are true and correct. |                |   |
| Date May 16, 2015                   | Signature      | Marilyn Johnson   |
|                                     |                | Marilyn Johnson //  |
|                                     |                | Debtor  |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 8 of 52

B8 (Form 8) (12/08)

### United States Bankruptcy Court Northern District of Illinois

|        |  | 1401 ther ii Dis         | ti ict di illilidis                       |                            |                                       |
|--------|--|--------------------------|---|----------------------------|---------------------------------------|
| In re  | Marilyn Johnson  |                          |   | Case No.                   |                                       |
|        |  | I                        | Debtor(s)                                 | Chapter                    | 7                                     |
| PART   | CHAPTER 7 INI 'A - Debts secured by property of  | DIVIDUAL DEBTO           |   |                            |                                       |
|        | property of the estate. Attach ac  |                          |   |                            | ar adol minon in securous of          |
| Proper | ty No. 1   |                          |   |                            |                                       |
|        | tor's Name:<br>Receivable Mgmt LLC   |                          | Describe Property S<br>2005 Chevy Equinox |                            | t:<br>00 miles and needs work         |
| Proper | ty will be (check one):  |                          | <u> </u>                                  | · ·                        |                                       |
|        | Surrendered  | Retained                 |   |                            |                                       |
|        | ning the property, I intend to (check a<br>Redeem the property<br>Reaffirm the debt<br>Other. Explain <u>Fair Market Value</u> |                          | ien using 11 U.S.C. § 5                   | 22(f)).                    |                                       |
| Proper | ty is (check one):   |                          |   |                            |                                       |
| _      | Claimed as Exempt  |                          | ☐ Not claimed as exe                      | empt                       |                                       |
| Attach | B - Personal property subject to unex additional pages if necessary.)  ty No. 1  | pired leases. (All three | columns of Part B mu                      | st be complete             | ed for each unexpired lease.          |
| Lesson | r's Name:<br>E-  | Describe Leased Pro      | pperty:                                   | Lease will be U.S.C. § 365 | e Assumed pursuant to 11 5(p)(2):  NO |
| person | re under penalty of perjury that th<br>al property subject to an unexpired<br>May 16, 2015                                     | I lease. Signature       | Marilyn Johnson                           | operty of my               | estate securing a debt and/o          |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 9 of 52

B 201B (Form 201B) (12/09)

### United States Bankruptcy Court Northern District of Illinois

|         | Northern District of Illinois   |                              |                |                               |  |  |  |  |
|---------|---|------------------------------|----------------|-------------------------------|--|--|--|--|
| In re   | Marilyn Johnson   |                              | Case No.       |                               |  |  |  |  |
|         |   | Debtor(s)                    | Chapter        | 7                             |  |  |  |  |
|         | CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE |                              |                |                               |  |  |  |  |
|         | I (We), the debtor(s), affirm that I (we) have                                      | Certification of Debtor      |                | hu S 242(h) aféha Daulannéan  |  |  |  |  |
| Code.   | 1 (we) have i   | And read the attached holice | , as required  | by § 542(b) of the Bankrupicy |  |  |  |  |
| Marily  | n Johnson   | x Markey                     | AA             | May 16, 2015                  |  |  |  |  |
| Printed | d Name(s) of Debtor(s)  | Signature of Debto           | r              | Date                          |  |  |  |  |
| Case N  | No. (if known)  | X Signature of Joint I       | Debtor (if any | y) Date                       |  |  |  |  |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

|       | United States Bankruptcy Court  Northern District of Illinois |   |                     |                             |  |  |  |  |
|-------|---|---|---------------------|-----------------------------|--|--|--|--|
| In re | Marilyn Johnson   | Debtor(s)                                 | Case No.<br>Chapter | 7                           |  |  |  |  |
|       | VER   | RIFICATION OF CREDITOR MA                 | TRIX                |                             |  |  |  |  |
|       |   | Number of C                               | reditors: _         | 17                          |  |  |  |  |
|       | The above-named Debtor(s) h (our) knowledge.                  | nereby verifies that the list of creditor | s is true and       | l correct to the best of my |  |  |  |  |
| Date: | May 16, 2015  | Marilyn Johnson                           | gioqu               |                             |  |  |  |  |

Signature of Debtor

### Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 11 of 52

B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Northern District of Illinois

| In re | Marilyn Johnson |           | Case No. |   |
|-------|-----------------|-----------|----------|---|
|       | •               | Debtor(s) | Chapter  | 7 |

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

# Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 12 of 52

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont.  | Page 2   |
|--|--|
| deficiency so as to be incapable of realizing responsibilities.);  □ Disability. (Defined in 11 U.S.C. § | § 109(h)(4) as impaired by reason of mental illness or mental and making rational decisions with respect to financial § 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or combat zone. |
| ☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in         | y administrator has determined that the credit counseling this district.   |
| I certify under penalty of perjury that the  | e information provided above is true and correct.  |
| Signature of Debtor:   | /s/ Marilyn Johnson  Marilyn Johnson   |
| Date: May 16, 2015   |  |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 13 of 52

B6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court Northern District of Illinois**

| In re | Marilyn Johnson |        | Case No |   |
|-------|-----------------|--------|---------|---|
| _     |                 | Debtor | ,       |   |
|       |                 |        | Chapter | 7 |
|       |                 |        | •       |   |

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property   | Yes                  | 1                | 0.00              |             |          |
| B - Personal Property   | Yes                  | 3                | 3,457.00          |             |          |
| C - Property Claimed as Exempt  | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims  | Yes                  | 1                |                   | 16,391.22   |          |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                           | Yes                  | 7                |                   | 9,709.50    |          |
| G - Executory Contracts and<br>Unexpired Leases                                 | Yes                  | 1                |                   |             |          |
| H - Codebtors   | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                   | Yes                  | 2                |                   |             | 1,657.91 |
| J - Current Expenditures of Individual<br>Debtor(s)                             | Yes                  | 2                |                   |             | 1,727.00 |
| Total Number of Sheets of ALL Schedu  | ıles                 | 20               |                   |             |          |
|   | T                    | otal Assets      | 3,457.00          |             |          |
|   |                      |                  | Total Liabilities | 26,100.72   |          |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 14 of 52

B 6 Summary (Official Form 6 - Summary) (12/14)

### **United States Bankruptcy Court Northern District of Illinois**

| In re | Marilyn Johnson |        | Case No. |   |
|-------|-----------------|--------|----------|---|
| •     | ·               | Debtor | -,       |   |
|       |                 |        | Chapter  | 7 |

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

#### State the following:

| Average Income (from Schedule I, Line 12)  | 1,657.91 |
|--|----------|
| Average Expenses (from Schedule J, Line 22)  | 1,727.00 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 2,207.86 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column                  |      | 12,391.22 |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 9,709.50  |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 22,100.72 |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 15 of 52

| R6A | (Official | Form | 6A) | (12/07) |  |
|-----|-----------|------|-----|---------|--|

| In re | Marilyn Johnson | Case No. |  |
|-------|-----------------|----------|--|
|       |                 | Debtor   |  |

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 16 of 52

B6B (Official Form 6B) (12/07)

| In re | Marilyn Johnson | Case No. |
|-------|-----------------|----------|
|       | <u> </u>        | Dahton   |

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|    | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|----|---|------------------|--------------------------------------|---|---|
| 1. | Cash on hand  | Cash             |                                      | -   | 25.00   |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | Checking         | & Savings- Chase                     | -   | 82.00   |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |                                      |   |   |
| 4. | Household goods and furnishings, including audio, video, and computer equipment.  | 3 Rooms          |                                      | -   | 750.00  |
| 5. | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | X                |                                      |   |   |
| 6. | Wearing apparel.  | Clothes          |                                      | -   | 600.00  |
| 7. | Furs and jewelry.   | X                |                                      |   |   |
| 8. | Firearms and sports, photographic, and other hobby equipment.   | Χ                |                                      |   |   |
| 9. | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | X                |                                      |   |   |
| 10 | Annuities. Itemize and name each issuer.  | X                |                                      |   |   |
|    |   |                  |                                      |   |   |
|    |   |                  | C                                    | Sub-Total of this page)                     | al > 1,457.00   |

2 continuation sheets attached to the Schedule of Personal Property

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 17 of 52

B6B (Official Form 6B) (12/07) - Cont.

| In re | Marilyn Johnson | Case No. |
|-------|-----------------|----------|
| _     |                 | Debtor   |

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |                                      |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | Х                |                                      |   |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | Х                |                                      |   |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | Χ                |                                      |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | Х                |                                      |   |   |
| 16. | Accounts receivable.  | Χ                |                                      |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | Х                |                                      |   |   |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |                                      |   |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |   |   |
|     |   |                  |                                      | Sub-Total                                   | al > 0.00   |
|     |   |                  |                                      | (Total of this page)                        |   |

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

### Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 18 of 52

B6B (Official Form 6B) (12/07) - Cont.

| In re | Marilyn Johnson | Case No. |
|-------|-----------------|----------|
|       |                 | ;        |

### Debtor

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property              | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|---|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | Х                |   |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | Х                |   |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |   |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | 20<br>wo         | 05 Chevy Equinox- over 120,000 miles and needs rk | -   | 2,000.00  |
| 26. | Boats, motors, and accessories.   | Х                |   |   |   |
| 27. | Aircraft and accessories.   | Х                |   |   |   |
| 28. | Office equipment, furnishings, and supplies.  | X                |   |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | Χ                |   |   |   |
| 30. | Inventory.  | Х                |   |   |   |
| 31. | Animals.  | Х                |   |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | X                |   |   |   |
| 33. | Farming equipment and implements.   | X                |   |   |   |
| 34. | Farm supplies, chemicals, and feed.   | Χ                |   |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | X                |   |   |   |

| Sub-Total > 2,000.00 (Total of this page) | Total > 3,457.00

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 19 of 52

B6C (Official Form 6C) (4/13)

| т     | Marthur Jahrensen | C = N    |  |
|-------|-------------------|----------|--|
| In re | Marilyn Johnson   | Case No. |  |
|       | •                 | ;        |  |
|       |                   | Debtor   |  |

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds                         |
|---|---|
| (Check one box)   | \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte |
| □ 11 U.S.C. §522(b)(2)  | with respect to cases commenced on or after the date of adjustment.)                |
| ■ 11 U.S.C. §522(b)(3)  |   |

| Description of Property   | Specify Law Providing<br>Each Exemption       | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|---|---|----------------------------------|---|
| Cash on Hand<br>Cash  | 735 ILCS 5/12-1001(b)                         | 25.00                            | 25.00   |
| Checking, Savings, or Other Financial Accounts, Cer<br>Checking & Savings- Chase                              | tificates of Deposit<br>735 ILCS 5/12-1001(b) | 82.00                            | 82.00   |
| Household Goods and Furnishings<br>3 Rooms  | 735 ILCS 5/12-1001(b)                         | 750.00                           | 750.00  |
| Wearing Apparel Clothes   | 735 ILCS 5/12-1001(a)                         | 100%                             | 600.00  |
| Automobiles, Trucks, Trailers, and Other Vehicles<br>2005 Chevy Equinox- over 120,000 miles and<br>needs work | 735 ILCS 5/12-1001(c)                         | 2,400.00                         | 4,000.00  |

Total: 3,857.00 5,457.00

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Page 20 of 52 Document

B6D (Official Form 6D) (12/07)

| In re | Marilyn Johnson | Case No. |  |
|-------|-----------------|----------|--|
| _     |                 |          |  |
|       |                 | Debtor   |  |

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN   | N<br>T<br>I | LIQUI        | DISPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |  |  |
|--|-----------------|------------------------|--|-------------|--------------|----------|--|---------------------------------|--|--|
| Account No. 900-039580   |                 |                        | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN  2005 Chevy Equinox- over 120,000 miles and needs work  CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL T T E D |             |              |          |  |                                 |  |  |
| PRA Receivable Mgmt LLC<br>10 Orchard. Ste 100<br>Lake Forest, CA 92630                              |                 | -                      |  |             | D            |          | 16.391.22  | 12,391.22                       |  |  |
| Account No.  | 十               | T                      | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | $\vdash$    |              | H        | . 3,001.22   | . =,00 : . = 2                  |  |  |
| Account No.  |                 |                        | Value \$   |             |              |          |  |                                 |  |  |
|  |                 |                        | Value \$   |             |              |          |  |                                 |  |  |
| Account No.  |                 |                        | Value \$   |             |              |          |  |                                 |  |  |
| continuation sheets attached   |                 | l                      | <u>l</u>   |             | ota<br>pag   |          | 16,391.22  | 12,391.22                       |  |  |
|  |                 |                        | (Report on Summary of Sc   |             | `ota<br>lule |          | 16,391.22  | 12,391.22                       |  |  |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 21 of 52

B6E (Official Form 6E) (4/13)

| In re | Marilyn Johnson | Case No. |
|-------|-----------------|----------|
| -     |                 | Debtor   |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). ☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). ☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 22 of 52

B6F (Official Form 6F) (12/07)

| In re | Marilyn Johnson | Case No |  |
|-------|-----------------|---------|--|
| _     |                 | Debtor  |  |

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| — Check and con it decid has no election holding unsecut                                  |        |                  | is to report on any seriouse 1.   |                 |             |        |            |                 |
|---|--------|------------------|---|-----------------|-------------|--------|------------|-----------------|
| CREDITOR'S NAME,  | CO     | Hu               | sband, Wife, Joint, or Community  | CO              | U           | [<br>] |            |                 |
| MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | DEBTOR | H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | O Z H L Z G E Z | UNLLQULDAT  | FUTE   | )<br> <br> | AMOUNT OF CLAIM |
| Account No.   |        |                  | Personal Loan   | T               | T<br>E<br>D |        | Ī          |                 |
| Americash Loans<br>880 Lee Street<br>Suite 302<br>Des Plaines, IL 60016                   |        | -                |   |                 |             |        |            | 0.00            |
| Account No.   |        |                  | Deficiency  |                 |             | T      | †          |                 |
| Americredit<br>P.O. Box 78143<br>Phoenix, AZ 85062-8143                                   |        | -                |   |                 |             |        |            | Unknown         |
| Account No. 4110010481312904A   |        | ┝                | Opened 2/01/14 Last Active 4/09/14  | +               |             | H      | +          |                 |
| Amerimark Premier<br>1515 S 21st St<br>Clinton, IA 52732                                  |        | -                | Charge Account  |                 |             |        |            | 114.00          |
| Account No.   | ┢      | $\vdash$         |   | +               | $\vdash$    | ┝      | +          | 114.00          |
| AT&T<br>P.O. Box 8212<br>Aurora, IL 60572-8212  |        | -                |   |                 |             |        |            | 0.00            |
| _6 continuation sheets attached   |        |                  |   | Sub             |             |        | †          | 114.00          |
| Continuation brices attached  |        |                  | (Total of   | this            | pag         | ge)    | ) [        | 111.00          |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 23 of 52

B6F (Official Form 6F) (12/07) - Cont.

| In re | Marilyn Johnson | Case No. |
|-------|-----------------|----------|
| _     |                 | Debtor   |

|   | С               | Н           | usband, Wife, Joint, or Community                             | Тс       | Ιυ              | ΙD           |                 |
|---|-----------------|-------------|---|----------|-----------------|--------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C<br>A<br>H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | ONTINGEN | N L I Q U I D A | DISPUTED     | AMOUNT OF CLAIM |
| Account No.   |                 |             |   |          | E               |              |                 |
| Avon<br>c/o Allied Data Corporation<br>13111 Westheimer, Suite 400<br>Houston, TX 77077-5547      |                 | _           |   |          |                 |              | 0.00            |
| Account No.   | T               | T           | Loan  | T        | $\dagger$       |              |                 |
| Check N GO<br>8357 South Cottage Grove<br>Chicago, IL 60619                                       |                 | -           |   |          |                 |              | 2,000.00        |
| Account No.   |                 | ╁           | Tickets   | +        | +               | <del> </del> | ,               |
| City of Chicago<br>Department of Revenue<br>121 N. LaSalle St. Rm. 107A<br>Chicago, IL 60602      |                 | -           |   |          |                 |              | 320.00          |
| Account No.   |                 | t           |   | +        | t               |              |                 |
| City of Chicago<br>Department of Revenue<br>121 N. LaSalle St. Rm. 107A<br>Chicago, IL 60602      |                 | -           |   |          |                 |              | 218.50          |
| Account No.   | -               | $\vdash$    |   | +        |                 |              |                 |
| Comcast<br>1255 W North Ave<br>Chicago, IL 60622-1562   |                 | _           |   |          |                 |              | 0.00            |
| Sheet no. 1 of 6 sheets attached to Schedule of   |                 | 1           | 1   | Sub      | tota            | al           | 2 520 50        |
| Creditors Holding Unsecured Nonpriority Claims  |                 |             | (Total of   | this     | pa              | ge)          | 2,538.50        |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 24 of 52

B6F (Official Form 6F) (12/07) - Cont.

| In re | Marilyn Johnson | Case No. |
|-------|-----------------|----------|
| -     |                 | Debtor   |

|  |          |          |   |          |           |            | _         |                 |
|--|----------|----------|---|----------|-----------|------------|-----------|-----------------|
| CREDITOR'S NAME,   | C        | Hus      | sband, Wife, Joint, or Community  |          | C         | U I<br>I N |           |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)         | CODEBTOR | H & J C  | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. |          | NT I NGEN | LIQUIDATED | S J       | AMOUNT OF CLAIM |
| Account No.  |          |          |   |          | T         | T          | Γ         |                 |
| Continental Finance Co.<br>P.O. Box 11743<br>Wilmington, DE 19850-1743                   |          | -        |   |          |           | D          |           | 0.00            |
| Account No. 41100104813129A4A  |          | H        | Opened 2/01/14 Last Active 4/09/14  | $\dashv$ | +         | +          | +         |                 |
| Dr Leonards/carol Wrig<br>1515 S 21st St<br>Clinton, IA 52732                            |          | -        | Charge Account  |          |           |            |           | 26.00           |
| Account No. 5206056012176353   |          |          | Opened 7/17/08 Last Active 10/24/08   | $\dashv$ | +         | +          | +         |                 |
| First Bk Of De/contine<br>1608 Walnut Street<br>Philadelphia, PA 19103                   |          | -        | Credit Card   |          |           |            |           | 0.00            |
| Account No.  |          |          | Credit Card   |          | $\top$    | $\top$     | $\dagger$ |                 |
| First Premeir Bank Post Office Box 5147 Bankruptcy Department Sioux Falls, SD 57117-5147 |          | -        |   |          |           |            |           | 0.00            |
| Account No. 986363421857O  |          | $\vdash$ | Opened 8/26/09 Last Active 5/13/12  | $\dashv$ | +         | +          | +         |                 |
| Ginnys/Swiss Colony Inc<br>Attn: Bankruptcy<br>1112 7th Ave<br>Monroe, WI 53566          |          | -        | Charge Account  |          |           |            |           | 0.00            |
| Sheet no. 2 of 6 sheets attached to Schedule of  |          |          |   | Su       | bto       | tal        | $\dagger$ |                 |
| Creditors Holding Unsecured Nonpriority Claims   |          |          | (Total  | of thi   | s p       | age        | ) [       | 26.00           |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 25 of 52

B6F (Official Form 6F) (12/07) - Cont.

| In re | Marilyn Johnson | Case No. |  |
|-------|-----------------|----------|--|
| -     |                 | Debtor , |  |

|   |          |        |                                    |                  | 1        | -        |                   |
|---|----------|--------|------------------------------------|------------------|----------|----------|-------------------|
| CREDITOR'S NAME,                                | CODEBTOR |        | sband, Wife, Joint, or Community   | C O N T          | -rzc     | DISPUTED |                   |
| MAILING ADDRESS<br>INCLUDING ZIP CODE,          | D<br>E   | H<br>W | DATE CLAIM WAS INCURRED AND        | N                | ŀ        | S<br>P   |                   |
| AND ACCOUNT NUMBER                              | B        | J      | CONSIDERATION FOR CLAIM. IF CLAIM  | 11               | Q        | U        | AMOUNT OF CLAIM   |
| (See instructions above.)                       | Ö        | С      | IS SUBJECT TO SETOFF, SO STATE.    | N<br>G<br>E<br>N | Ĭ        | Ė        | 7 HMOCH TO CE7 HW |
| Account No.                                     | Ë        |        | Overpayment                        | HĀ               | QUIDATED |          |                   |
|   | 1        |        |                                    |                  | D        |          |                   |
| Illinois Department of Employment               |          |        |                                    |                  |          |          |                   |
| Benefit Repayments                              |          | -      |                                    |                  |          |          |                   |
| P.O. Box 4385                                   |          |        |                                    |                  |          |          |                   |
| Chicago, IL 60680-4385                          |          |        |                                    |                  |          |          |                   |
|   |          |        |                                    |                  |          |          | 1,200.00          |
| Account No.                                     | T        |        |                                    |                  |          |          |                   |
| IDMorgan Chass                                  |          |        |                                    |                  |          |          |                   |
| JPMorgan Chase                                  |          | L      |                                    |                  |          |          |                   |
| Tiburon Financial, L.L.C.                       |          | -      |                                    |                  |          |          |                   |
| P.O. Box 770                                    |          |        |                                    |                  |          |          |                   |
| Boys Town, NE 68010-0770                        |          |        |                                    |                  |          |          | 0.00              |
| Account No.                                     |          |        | Collection                         | +                |          |          | 0.00              |
|   | 1        |        |                                    |                  |          |          |                   |
| Midland Credit Mgmt                             |          |        |                                    |                  |          |          |                   |
| 8875 Aero Dr Ste 200                            |          | -      |                                    |                  |          |          |                   |
| San Diego, CA 92123                             |          |        |                                    |                  |          |          |                   |
|   |          |        |                                    |                  |          |          |                   |
|   |          |        |                                    |                  |          |          | 827.00            |
| Account No. 301108556                           |          |        | Opened 2/01/13 Last Active 2/20/14 |                  |          |          |                   |
|   | 1        |        | Unsecured                          |                  |          |          |                   |
| Monterey Financial Svc                          |          |        |                                    |                  |          |          |                   |
| Po Box 5199                                     |          | -      |                                    |                  |          |          |                   |
| Oceanside, CA 92052                             |          |        |                                    |                  |          |          |                   |
|   |          |        |                                    |                  |          |          |                   |
|   |          |        |                                    |                  |          |          | 0.00              |
| Account No.                                     |          |        | Service                            |                  |          |          |                   |
|   |          |        |                                    |                  |          |          |                   |
| People's Energy/ Gas                            | 1        |        |                                    |                  |          | 1        |                   |
| Bankruptcy Department                           |          | -      |                                    |                  |          |          |                   |
| 130 East Randolph Drive                         | 1        |        |                                    |                  |          | 1        |                   |
| Chicago, IL 60601                               |          |        |                                    |                  |          |          |                   |
|   |          | L      |                                    |                  |          | L        | 2,000.00          |
| Sheet no. 3 of 6 sheets attached to Schedule of |          |        |                                    | Sub              |          |          | 4,027.00          |
| Creditors Holding Unsecured Nonpriority Claims  |          |        | (Total o                           | this             | pag      | ge)      | 4,027.00          |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 26 of 52

B6F (Official Form 6F) (12/07) - Cont.

| In re | Marilyn Johnson | Case No. |
|-------|-----------------|----------|
| _     |                 | Debtor   |

|  | 1.0      | I     | should Wife Island on Occasionality   |          |          |              | D  |                 |
|--|----------|-------|---|----------|----------|--------------|----|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | CODEBTOR | H W J | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. |          |          |              |    | AMOUNT OF CLAIM |
| Account No. 7500065864350  |          |       | Opened 1/18/13 Last Active 4/22/14  |          | Т        | UNLIQUIDATED |    |                 |
| Peoples Gas<br>Attention: Bankruptcy Department<br>130 E. Randolph 17th Floor<br>Chicago, IL 60601 |          | -     | Agriculture   |          |          | D            |    | 1,975.00        |
| Account No. 7500062230714  |          |       | Opened 10/11/11   |          | 1        |              |    |                 |
| Peoples Gas<br>Attention: Bankruptcy Department<br>130 E. Randolph 17th Floor<br>Chicago, IL 60601 |          | -     | Agriculture   |          |          |              |    | 0.00            |
| Account No. 7500052361159  |          |       | Opened 10/02/08 Last Active 10/04/11  | $\dashv$ | $\dashv$ |              |    |                 |
| Peoples Gas<br>Attention: Bankruptcy Department<br>130 E. Randolph 17th Floor<br>Chicago, IL 60601 |          | -     | Agriculture   |          |          |              |    | 0.00            |
| Account No. 7500049230297  |          |       | Opened 10/18/07 Last Active 9/30/08   |          | 1        |              |    |                 |
| Peoples Gas<br>Attention: Bankruptcy Department<br>130 E. Randolph 17th Floor<br>Chicago, IL 60601 |          | -     | Agriculture   |          |          |              |    | 0.00            |
| Account No. 7500045390579  |          |       | Opened 9/23/06 Last Active 10/15/07   | $\dashv$ | $\dashv$ |              |    |                 |
| Peoples Gas<br>Attention: Bankruptcy Department<br>130 E. Randolph 17th Floor<br>Chicago, IL 60601 |          | -     | Agriculture   |          |          |              |    | 0.00            |
| Sheet no. 4 of 6 sheets attached to Schedule of  |          | _     |   | Su       | bto      | otal         |    | 1,975.00        |
| Creditors Holding Unsecured Nonpriority Claims   |          |       | (Total  | of thi   | s p      | ag           | e) | 1,873.00        |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 27 of 52

B6F (Official Form 6F) (12/07) - Cont.

| In re | Marilyn Johnson | Case No. |  |
|-------|-----------------|----------|--|
| -     |                 | Debtor , |  |

|  | I c      | ш           | sband, Wife, Joint, or Community  | Ic        | Пп  | Ιn       | I                                       |
|--|----------|-------------|---|-----------|-----|----------|---|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)    | CODEBTOR | J<br>H<br>W | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | Q   | DISPUTED | AMOUNT OF CLAIM                         |
| Account No. 7500040302923  |          |             | Opened 4/20/05 Last Active 9/08/06  | Т         | E   |          |   |
| Peoples Gas<br>Attention: Bankruptcy Department<br>130 E. Randolph 17th Floor<br>Chicago, IL 60601   |          | -           | Agriculture   |           |     |          | 0.00                                    |
| Account No.  |          |             | Collection  |           | T   |          |   |
| Portfolio Recoveries<br>120 Corporate Blvd Ste 1<br>Norfolk, VA 23502                                |          | -           |   |           |     |          | 665.00                                  |
| Account No.  | -        |             |   |           | ╁   | <u> </u> | 000.00                                  |
| Premier Bank Card<br>Recievable Managment Ind<br>P.O. Box 129<br>Thorofore, NJ 06068-0129            |          | -           |   |           |     |          | 0.00                                    |
| Account No.  |          |             | Medical Bill  |           |     |          |   |
| Quest Diagnostic<br>1355 Mittel Blvd<br>Wood Dale, IL 60191  |          | -           |   |           |     |          | 0.00                                    |
| Account No. 2980513227   | ╁        | _           | Opened 12/01/12   | +         |     | -        |   |
| Radiological Physicians Ltd. Northwest Collectors 3601 Algonquin Rd Ste 23 Rolling Meadows, IL 60008 |          | -           | Collection Attorney   |           |     |          | 364.00                                  |
| Sheet no. <u>5</u> of <u>6</u> sheets attached to Schedule of  | -        | -           |   | Sub       |     |          | 1,029.00                                |
| Creditors Holding Unsecured Nonpriority Claims   |          |             | (Total of   | this      | pag | ge)      | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 28 of 52

B6F (Official Form 6F) (12/07) - Cont.

| In re | Marilyn Johnson | Case No. |  |
|-------|-----------------|----------|--|
| -     |                 | Debtor , |  |

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)          | C O D E B T O R | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | COZH-ZGEZH    | OZ CO_ C <   | DISPUTED | AMOUNT OF CLAIM |
|--|-----------------|------------------------|---|---------------|--------------|----------|-----------------|
| Account No.  |                 |                        | Medical Bill  | T             | E            |          |                 |
| Rush University Medical Center<br>21238 Network Place<br>Collections/ Bankruptcy<br>Chicago, IL 60673-1212 |                 | _                      |   |               | ט            |          | 0.00            |
| Account No. 30000186559461000  |                 |                        | Opened 12/08/08 Last Active 1/05/13   | T             |              | H        |                 |
| Santander Consumer Usa<br>Po Box 961245<br>Ft Worth, TX 76161  |                 | _                      | Automobile  |               |              |          |                 |
|  |                 |                        |   |               |              |          | 0.00            |
| Account No. 3276450015693227  Webbank/fingerhut Fres 6250 Ridgewood Road St Cloud, MN 56303                |                 | -                      | Opened 4/01/13 Last Active 11/01/13 Installment Sales Contract  |               |              |          |                 |
|  |                 |                        |   |               |              |          | 0.00            |
| Account No.  |                 |                        |   |               |              |          |                 |
| WOW<br>P.O. Box 5715<br>Carol Stream, IL 60197-5715  |                 | -                      |   |               |              |          | 0.00            |
| Account No.  |                 |                        |   |               |              |          | 0.00            |
|  |                 |                        |   |               |              |          |                 |
| Sheet no. 6 of 6 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims             | ı               | <u> </u>               | (Total of t   | Subt<br>his p |              | - 1      | 0.00            |
|  |                 |                        | (Report on Summary of So  |               | `ota<br>lule | - 1      | 9,709.50        |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 29 of 52

B6G (Official Form 6G) (12/07)

| In re | Marilyn Johnson |        | Case No. |  |
|-------|-----------------|--------|----------|--|
| -     | •               | Debtor | ·        |  |

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 30 of 52

B6H (Official Form 6H) (12/07)

| In re | Marilyn Johnson |        | Case No. |
|-------|-----------------|--------|----------|
| -     |                 | Debtor |          |

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

# Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 31 of 52

| E:11               | in this information to ideatify   |   |   |                     |                          |   |  |                             |  |  |  |  |
|--------------------|---|---|---|---------------------|--------------------------|---|--|-----------------------------|--|--|--|--|
|                    | in this information to identify your c  |   |   |                     |                          |   |  |                             |  |  |  |  |
| Del                | otor 1 Marilyn Joh  | nson  |   |                     | _                        |   |  |                             |  |  |  |  |
|                    | otor 2  |   |   |                     | _                        |   |  |                             |  |  |  |  |
| Uni                | ted States Bankruptcy Court for the   | e: NORTHERN DISTRIC                                   | CT OF ILLINOIS                                    |                     | _                        |   |  |                             |  |  |  |  |
|                    | se number<br>nown)  |   | -   |                     |                          | eck if this is: An amende A suppleme                  | etition chapter                          |                             |  |  |  |  |
| O.                 | fficial Form B 6I   |   |   |                     |                          |   |  | Jate.                       |  |  |  |  |
|                    | chedule I: Your Inc   | ome   |   |                     |                          | MM / DD/ Y  | YYY                                      | 12/13                       |  |  |  |  |
| sup<br>spo<br>atta | as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment | are married and not fili<br>Ir spouse is not filing w | ing jointly, and your s<br>ith you, do not includ | pouse i<br>e infori | is living w<br>mation ab | ith you, incl<br>out your spe                         | ude information a<br>ouse. If more space | about your<br>ce is needed, |  |  |  |  |
| 1.                 | Fill in your employment information.  |   | Debtor 1  |                     |                          | Debtor 2  | or non-filing spo                        | use                         |  |  |  |  |
|                    | If you have more than one job, attach a separate page with information about additional   | Empleyment status                                     | ■ Employed  |                     |                          | ☐ Employed  |  |                             |  |  |  |  |
|                    |   | Employment status                                     | ☐ Not employed                                    |                     |                          | ☐ Not er  | mployed                                  |                             |  |  |  |  |
|                    | employers.  | Occupation  | Security  |                     |                          |   |  |                             |  |  |  |  |
|                    | Include part-time, seasonal, or self-employed work.   | Employer's name                                       | Premier Security                                  |                     |                          |   |  |                             |  |  |  |  |
|                    | Occupation may include student or homemaker, if it applies.   |   |   |                     |                          | 8750 W Bryn Mawr Ave<br>Ste 1000<br>Chicago, IL 60631 |  |                             |  |  |  |  |
|                    |   | How long employed t                                   | here? 2 Years                                     |                     |                          | _   |  |                             |  |  |  |  |
| Par                | t 2: Give Details About Mo  | nthly Income  |   |                     |                          |   |  |                             |  |  |  |  |
| spou<br>If yo      | mate monthly income as of the duse unless you are separated.  ou or your non-filing spouse have me space, attach a separate sheet to                            | ore than one employer, co                             |   |                     |                          |   | ,  | · ·                         |  |  |  |  |
|                    |   |   |   |                     | For D                    | Debtor 1  | For Debtor 2 or non-filing spou          |                             |  |  |  |  |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,  |   |   | 2.                  | \$                       | 2,152.15  | \$                                       | N/A                         |  |  |  |  |
| 3.                 | Estimate and list monthly over  | time pay.   |   | 3.                  | +\$                      | 0.00  | +\$                                      | N/A                         |  |  |  |  |
| 4.                 | Calculate gross Income. Add li  | ne 2 + line 3.  |   | 4.                  | \$2,                     | ,152.15   | \$ <u>N//</u>                            | <u>A</u>                    |  |  |  |  |
|                    |   |   |   |                     |                          |   |  |                             |  |  |  |  |

Official Form B 6I Schedule I: Your Income page 1

## Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 32 of 52

| Deb | tor 1              | Marilyn Johnson   |                | (         | Case        | number ( <i>if kr</i> | nown)        |            |           |                |                  |
|-----|--------------------|---|----------------|-----------|-------------|-----------------------|--------------|------------|-----------|----------------|------------------|
|     |                    |   |                |           | For         | Debtor 1              |              |            | Debtor    |                |                  |
|     | Cop                | by line 4 here  | 4.             |           | \$          | 2,152                 | 2.15         | \$         |           | N/A            | _                |
| 5.  | List               | all payroll deductions:   |                |           |             |                       |              |            |           |                |                  |
|     | 5a.                | Tax, Medicare, and Social Security deductions   | 5a             | ā.        | \$          | 444                   | 1.25         | \$         |           | N/A            |                  |
|     | 5b.                | Mandatory contributions for retirement plans  | 5b             | Ο.        | \$          | (                     | 0.00         | \$         |           | N/A            | <u> </u>         |
|     | 5c.                | Voluntary contributions for retirement plans  | 50             |           | \$          |                       | 0.00         | \$         |           | N/A            | _                |
|     | 5d.                | Required repayments of retirement fund loans  | 50             |           | \$          |                       | 0.00         | \$_        |           | N/A            | _                |
|     | 5e.                | Insurance   | 5e             |           | \$          |                       | 0.00         | \$_        |           | N/A            | _                |
|     | 5f.<br>5g.         | Domestic support obligations Union dues   | 5f.<br>5g      |           | \$<br>\$    |                       | 0.00<br>9.99 | \$_<br>\$  |           | N/A<br>N/A     | _                |
|     | 5h.                | Other deductions. Specify:  |                | ۶۰<br>۱.+ | \$<br>_     |                       | 0.00         | + \$       |           | N/A            | _                |
| 6.  |                    | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | <b>-</b><br>6. |           | \$<br>      |                       | 1.24         | \$         |           | N/A            | _                |
| 7.  |                    | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.             |           | \$<br>\$    | 1,657                 |              | \$         |           | N/A            | _                |
| 8.  |                    | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |                |           | _           | ,                     |              | _          |           |                | _                |
|     |                    | monthly net income.   | 8a             | ā.        | \$          | (                     | 0.00         | \$         |           | N/A            |                  |
|     | 8b.                | Interest and dividends  | 8b             | Ο.        | \$          | (                     | 0.00         | \$         |           | N/A            | <u> </u>         |
|     | 8c.<br>8d.         | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation   | 8c<br>8c       | d.        | \$          | (                     | 0.00         | \$_<br>\$_ |           | N/A<br>N/A     | _                |
|     | 8e.                | Social Security   | 86             | €.        | \$ <u>_</u> |                       | 0.00         | \$_        |           | N/A            | <u>-</u>         |
|     | 8f.<br>8g.         | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | e<br>8f.<br>80 |           | \$          |                       | 0.00<br>0.00 | \$_<br>\$  |           | N/A<br>N/A     | _                |
|     | 8h.                | Other monthly income. Specify:  | _              | ).+       | \$          |                       | 0.00         | · · ·      |           | N/A            | _                |
|     |                    |   | _              | Г         | _           |                       |              |            |           |                | _                |
| 9.  | Add                | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.             | 3         | \$          | (                     | 0.00         | \$         |           | N/A            | A                |
| 10. |                    | culate monthly income. Add line 7 + line 9.  I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10.            | \$        |             | 1,657.91              | + \$         |            | N/A       | = \$ _         | 1,657.91         |
| 11. | Incl<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not excity:                          | dep            |           |             |                       |              |            | Schedul   | le J.<br>+\$   | 0.00             |
| 12. |                    | If the amount in the last column of line 10 to the amount in line 11. The restee that amount on the Summary of Schedules and Statistical Summary of Certallies  |                |           |             |                       |              |            | e.<br>12. | \$             | 1,657.91         |
| 13. | Do                 | you expect an increase or decrease within the year after you file this form   | ?              |           |             |                       |              |            |           | Combi<br>month | ned<br>ly income |
|     |                    | No.   |                |           |             |                       |              |            |           |                |                  |

## Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 33 of 52

| E::::      | n this info                                    | tion to identify                    | 2118 222                    |   |   |                                 |  |   |         |
|------------|--|-------------------------------------|-----------------------------|---|---|---------------------------------|--|---|---------|
| FIII II    | n this informa                                 | tion to identify yo                 | our case:                   |   |   |                                 |  |   |         |
| Debt       | or 1   | Marilyn Johr                        | nson                        |   |   | Che                             | ck if this is:                             |   |         |
|            |  |                                     |                             |   |   |                                 | An amended filing                          |   |         |
| Debt       | or 2   | ( <b></b>                           |                             |   |   |                                 |  | ving post-petition chapte                           | er      |
| (Spo       | use, if filing)                                |                                     |                             |   |   |                                 | 13 expenses as of                          | the following date:                                 |         |
| Unite      | ed States Bankr                                | uptcy Court for the:                | NORTH                       | IERN DISTRICT OF ILLIN                                      | OIS   |                                 | MM / DD / YYYY                             |   |         |
| 0          |  |                                     |                             |   |   | _                               | A concrete filing to                       | r Dahtar 2 hassusa Dah                              |         |
|            | e number<br>nown)                              |                                     |                             |   |   |                                 | 2 maintains a sepa                         | r Debtor 2 because Deb<br>rate household            | ioi     |
| Of         | ficial Fo                                      | rm B 6J                             |                             |   |   |                                 |  |   |         |
|            |  | J: Your                             | _<br>Exper                  | ises  |   |                                 |  | 12  | /13     |
| Be a       | as complete a                                  | and accurate as                     | possible<br>eded, atta      | . If two married people a<br>ch another sheet to this       |   |                                 |  |   |         |
| Part<br>1. | 1: Descr<br>Is this a joir                     | ibe Your House                      | hold                        |   |   |                                 |  |   |         |
| ••         | -  |                                     |                             |   |   |                                 |  |   |         |
|            | ■ No. Go to □ Yes. <b>Doe</b>                  |                                     | in a separ                  | ate household?  |   |                                 |  |   |         |
|            | □ N  | 0                                   |                             |   |   |                                 |  |   |         |
|            | □ Ye   | es. Debtor 2 mus                    | st file a sep               | parate Schedule J.  |   |                                 |  |   |         |
| 2.         | Do you have                                    | e dependents?                       | ■ No                        |   |   |                                 |  |   |         |
|            | Do not list Do and Debtor 2                    |                                     | ☐ Yes.                      | Fill out this information for each dependent                | Dependent's relation<br>Debtor 1 or Debtor 2          |                                 | Dependent's age                            | Does dependent live with you?                       |         |
|            | Do not state                                   | the                                 |                             |   |   |                                 |  | □ No  |         |
|            | dependents'                                    | names.                              |                             |   |   |                                 |  | ☐ Yes   |         |
|            |  |                                     |                             |   |   |                                 |  | □ No  |         |
|            |  |                                     |                             |   |   |                                 |  | ☐ Yes   |         |
|            |  |                                     |                             |   |   |                                 |  | □ No  |         |
|            |  |                                     |                             |   |   |                                 |  | □ Yes   |         |
|            |  |                                     |                             |   |   |                                 |  | □ No  |         |
|            |  |                                     |                             |   |   |                                 |  | ☐ Yes   |         |
| 3.         | Do your eyn                                    | enses include                       | _                           |   |   |                                 |  | □ res   |         |
| J.         | expenses of                                    | f people other t<br>d your depende  | han $_{oldsymbol{\square}}$ | No<br>Yes   |   |                                 |  |   |         |
| Part       |  | ate Your Ongoi                      |                             |   |   |                                 |  |   |         |
| expe       | mate your ex<br>enses as of a<br>licable date. | cpenses as of your date after the l | our bankri<br>bankrupto     | uptcy filing date unless y<br>y is filed. If this is a supp | ou are using this for<br>olemental <i>Schedule</i> of | rm as a s<br><i>J</i> , check t | upplement in a Cha<br>the box at the top o | apter 13 case to repor<br>of the form and fill in t | t<br>he |
|            |  |                                     |                             | government assistance i                                     |   |                                 |  |   |         |
|            | value of such<br>icial Form 6I.                |                                     | d have in                   | cluded it on Schedule I:                                    | Your Income   |                                 | Your expe                                  | enses   |         |
| 4.         |  | or home owners and any rent for th  |                             | ses for your residence. I<br>or lot.                        | nclude first mortgage                                 |                                 | \$   | 699.00  |         |
|            | If not includ                                  | led in line 4:                      |                             |   |   |                                 |  |   |         |
|            |  | estate taxes                        |                             |   |   | 4a.                             | ·  | 0.00  |         |
|            |  | rty, homeowner's                    |                             |   |   | 4b.                             | \$   | 0.00  |         |
|            |  |                                     | •                           | upkeep expenses   |   | 4c.                             | <u> </u>                                   | 25.00   |         |
|            |  | owner's associat                    |                             |   |   | 4d.                             | \$   | 0.00  |         |
| 5          | Additional n                                   | nortgage navme                      | ants for w                  | our residence, such as ho                                   | me equity loans                                       | 5                               | 2  | 0.00  |         |

## Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 34 of 52

| 8b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 200 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 200 6c. Other, Specify: 6d. \$ C. Food and housekeeping supplies 7. \$ 300 6childcare and children's education costs 7. \$ 300 6childcare and children's education costs 8. \$ 10 6childcare and children's education costs 8. \$ 12 6childcare and children's education and services 8. \$ 12 6childcare and children's education and services 8. \$ 12 6childcare and children's education and services 8. \$ 12 6childcare and children's education and services 8. \$ 12 6childcare and children's education and services 8. \$ 12 6childcare and children's educated from your pay or included in lines 4 or 20. 8. \$ 12 6childcare and children's educated from your pay or included in lines 4 or 20. 8. \$ 12 6childcare and children's educated from your pay or included in lines 4 or 20. 8. \$ 12 6childcare and support that you did not report as a securic and support that you did not report as a seducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). 8. \$ 12 6childcare and children's educated in lines 4 or 5 of this form or on Schedule 1: Your Income. 80 80 80 80 80 80 80 80 80 80 80 80 80   | tor 1    | Marilyn Joh         | ison   | Case num      | ber (if known) |                              |
|--|----------|---------------------|--|---------------|----------------|------------------------------|
| Second Property   Second Pro   | []filiti | ies.                |  |               |                |                              |
| Sib. Water, sewer, garbage collection  Cib. Telephone, cell phone, Internet, satellite, and cable services  Cib. Other, Specify:  God A Other, Specify:  Coord and housekeeping supplies  Childcare and children's education costs  Clothing, laundry, and dry cleaning  Sib. Sib. Cib.  Clothing, laundry, and dry cleaning  Sib. Sib. Sib. Sib. Sib.  Clothing, laundry, and dry cleaning  Sib. Sib. Health insurance  Sib. Sib. Sib. Sib. Sib. Sib. Sib. Sib.   | 6a.      |                     | t. natural gas   | 6a.           | \$             | 90.00                        |
| Sc. Telephone, cell phone, Internet, satellite, and cable services  6c. Telephone, cell phone, Internet, satellite, and cable services  6c. Telephone, cell phone, Internet, satellite, and cable services  6c. Todot and housekeeping supplies  7. \$ 300  Childcare and children's education costs  8. \$  |          | •                   | •  |               | · -            | 0.00                         |
| School   Color   Col   |          | •                   |  |               | ·              | 200.00                       |
| Tool and housekeeping supplies  7. \$ 300 Childcare and children's education costs  8. \$ Clothing, laundry, and dry cleaning  9. \$ 125 Personal care products and services  10. \$ 25 Medical and dental expenses  11. \$ 25 Irransportation. Include gas, maintenance, bus or train fare.  20 not include car payments.  21. \$ 25 Charitable contributions and religious donations  14. \$ 55 Charitable contributions and religious donations  15. Life insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Lealth insurance  15c. Vehicle insurance  15c. \$ 45 Society:  15d. Other insurance. Specify:  15d. Car payments for Vehicle 1 17a. \$ 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Oth  |          | •                   |  |               | *              | 0.00                         |
| Childcare and children's education costs  8. \$ Colothing, laundry, and dry cleaning 9. \$ 125 Personal care products and services 10. \$ 25 Medical and dental expenses 11. \$ 25 Iransportation. Include gas, maintenance, bus or train fare. 25 Do not include car payments. 12. \$ 120 Sentertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50 Charitable contributions and religious donations 14. \$ 55 Iransportation. Include gas, maintenance, bus or train fare. 26 Do not include insurance deducted from your pay or included in lines 4 or 20. 27 Septimental insurance 28 Do not include insurance deducted from your pay or included in lines 4 or 20. 28 Septimental insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 16c. Vehicle axes deducted from your pay or included in lines 4 or 20. Specify: 16c. Car payments for Vehicle 1 17a. \$ 0 17b. \$ 0 17b. Car payments for Vehicle 2 17b. \$ 0 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17e. Spec   |          |                     |  |               | · -            | 300.00                       |
| Clothing, laundry, and dry cleaning 9. \$ 128 Personal care products and services 10. \$ 25 Medical and dental expenses 11. \$ 25 Iransportation. Include gas, maintenance, bus or train fare. 20 not include car payments. 12. \$ 120 Charitable contributions and religious donations 14. \$ 50 Charitable contributions and religious donations 14. \$ 50 Charitable contributions and religious donations 14. \$ 50 Charitable contributions and religious donations 15. \$ 23 Isb. Health insurance deducted from your pay or included in lines 4 or 20. 15. \$ 23 Isb. Health insurance 15b. \$ 0 Isb. Urbicle insurance 15b. \$ 0 Isb. Urbicle insurance 5, pecify 15d. \$ 0 Isb. Urbicle insurance 6, pecify 15d. \$ 0 Isb. Urbicle insurance 7, pecify 15d. \$ 0 Isb. Urbicle  |          |                     |  |               |                | 0.00                         |
| Personal care products and services  Medical and dental expenses Int. \$ 25 Medical and dental expenses Interpretation. Include gas, maintenance, bus or train fare.  Do not include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books Intercaliament, clubs, recreation, newspapers, and books Intercaliament, clubs, recreation, newspapers, magazines, and books Intercaliament, clubs, recreation, personal books Intercaliament, clubs, recreation, intercaliament, clubs, intercaliament, clubs, inter  | -        |                     |  |               | ·              | 125.00                       |
| Medical and dental expenses  Fransportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$  Charitable contributions and religious donations  14. \$  55.  Charitable contributions and religious donations  15. \$  16. \$  17. \$  18. \$  18. \$  19             |          |                     |  |               | -              | 25.00                        |
| Transportation. Include gas, maintenance, bus or train fare.  20 not include car payments.  Charitable contributions and religious donations  14. \$ 50  Charitable contributions and religious donations  15. \$ 50  Charitable contributions and religious donations  16. \$ 50  To not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. \$ 23  15b. Health insurance  15c. \$                             |          |                     |  |               |                | 25.00                        |
| Do not include car payments.  Intertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations Isa. Life insurance deducted from your pay or included in lines 4 or 20.  Isa. Life insurance deducted from your pay or included in lines 4 or 20.  Isa. Life insurance deducted from your pay or included in lines 4 or 20.  Isa. Life insurance for the latter insurance for the   |          |                     | •  | 11.           | Ψ              | 23.00                        |
| Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$ Charitable contributions and religious donations nsurance.  20 not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Life insurance 15c. Vehicle insurance  |          |                     |  | 12.           | \$             | 120.00                       |
| Charitable contributions and religious donations nsurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15b. S  |          |                     |  | 13.           | \$             | 0.00                         |
| nsurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  |          |                     |  |               | ·              | 50.00                        |
| 20 not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Life insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. S  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16. \$  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16. \$  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16. \$  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 17a. Car payments for Vehicle 1 17a. \$  Car payments for Vehicle 2 17b. \$  Car payments for Vehicle 2 17c. Other. Specify: 17c. \$  Country Dayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61).  Specify: 18. \$  Country Dayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61).  Specify: 19.  Country Dayments you make to support others who do not live with you.  Specify: 19.  Country Dayments you make to support others who do not live with you.  Specify: 20a. \$  Country Dayments your make to support your necessary of this form or on Schedule 1: Your Income.  Country Dayments your lines 4 or 5 of this form or on Schedule 1: Your Income.  Country Dayments your lines 4 or 5 of this form or on Schedule 1: Your Income.  Country Dayments your lines 4 or 5 of this form or on Schedule 1: Your Income.  Country Dayments your lines 4 or 5 of this form or on Schedule 1: Your Income.  Country Dayments your lines 4 or 5 of this form or on Schedule 1: Your Income.  Country Dayments your lines 4 or 5 of this form or on Schedule 1: Your Income.  Country Dayments your lines 4 or 5 of this form or on Schedule 1: Your Income.  Country Dayments your lines 4 or 5 of this form or on Schedule 1: Your Income.  Country D   |          |                     | iono ana rongiodo donaciono  |               | Ψ <u> </u>     | 30.00                        |
| 15a. Life insurance 15a. \$ 23  15b. Health insurance 15b. \$ 0  15c. Vehicle insurance 15c. \$ 45  15c. Vehicle insurance 15c. \$ 45  15d. Other insurance. Specify: 15d. \$ 0  Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0  Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0  Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0  Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17c. \$ 0  Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17c. \$ 0  Faxes. Do not include taxes deducted from your pay or included in lines 4 or 5 of this form of included in lines 4 or 5 of this form of included in lines 4 or 5 of this form or on Schedule I: Your Income. Specify: 19. Sp   |          |                     | nce deducted from your pay or included in lines 4 or 20.   |               |                |                              |
| 15b.   Health insurance   15b.   15c.   15   |          |                     | Indiana in the pay of moradou in into 1 of 20.   | 15a.          | \$             | 23.00                        |
| 15c. Vehicle insurance 15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. \$  16d. \$  16d. \$  16d. \$  17d. \$  16d. \$  17d. \$                       |          |                     | ce   |               |                | 0.00                         |
| If access Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  If access Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  If a. \$ 0.  If a. \$   |          |                     |  |               | · -            | 45.00                        |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  I7a. Car payments for Vehicle 1  I7b. Car payments for Vehicle 2  I7b. Specify:  I7c. Other. Specify:  I7d. Spec   |          |                     |  |               | *              | 0.00                         |
| Specify: 16. \$ Constallment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ Constallment or lease payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. \$ Constall the constall the constalline the constallin  |          |                     |  |               | *              | 0.00                         |
| Installment or lease payments:  If a. Car payments for Vehicle 1 If b. Car payments for Vehicle 2 If c. Other. Specify:  If c. Other. Specify:  If d. S  If d. Other. Specify:  If d. S   |          |                     | . tailed addition four pay of moladod in initio 4 of 20.   | 16.           | \$             | 0.00                         |
| 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. S 1   |          |                     | payments:  |               | · <del></del>  |                              |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Specify: 18. Specify: 19. Other payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Specify: 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20c. Homeowner's association or condominium dues 20c. Homeowner's association or condominium dues 20c. Specify: 21. +\$ 22. Specify: 23. Specify: 24. Specify: 25. Specify: 26. Specify: 27. Specify: 28. Specify: 29. Specify: 29. Specify: 20. Specify: 20. Specify: 20. Specify: 20. Specify: 20. Specify: 21. Specify: 22. Specify: 23. Specify: 24. Specify: 25. Specify: 26. Specify: 27. Specify: 28. Specify: 29. Specify: 29. Specify: 20. Specif  |          |                     |  | 17a.          | \$             | 0.00                         |
| 17c. Other. Specify: 17d. \$  18. \$  18. \$  18. \$  18. \$  19. \$  19. \$  19. \$  19. \$  19. \$  19. \$  19. \$  19. \$  19. \$  10. |          |                     |  | 17b.          | \$             | 0.00                         |
| And the control of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Specify:  Other payments you make to support others who do not live with you.  Specify:  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$  20b. \$  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$  20d  |          |                     |  | 17c.          | \$             | 0.00                         |
| Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.  Specify:  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. Maintenance, repair, and upkeep expenses  20d. Specify:  20d. Homeowner's association or condominium dues  20d. Specify:  21d. +\$  22d. Specify:  21d. +\$  22d. Specify:  23d. Specify:  24d. Specify:  25d. Specify:  26d. Homeowner's association or condominium dues  27d. Specify:  28d. Specify:  29d. Specify:  21d. S   |          |                     |  | 17d.          | \$             | 0.00                         |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.  Specify:  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$  20e. Homeowner's association or condominium dues  20e. \$  20ful:  20f   |          |                     |  | t as          | · <del></del>  |                              |
| Other payments you make to support others who do not live with you.  Specify:  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. \$ 20e. Homeowner's association or condominium dues 20e. \$ 20f. \$                                 |          |                     |  |               | \$             | 0.00                         |
| Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20ther: Specify: 21. +\$ 22. *  1,727.0  The result is your monthly expenses.  Calculate your monthly net income.   |          |                     |  |               | \$             | 0.00                         |
| 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. S 20e. Typerity, homeowner's association or condominium dues 20e. S 20e. Typerity Specify: 21. +\$ 22. S 21,727.0 23. S 24. S 25. S 26. S 27. S 27. S 28. S 28. S 29. S 20.   | Speci    | ify:                |  | 19.           |                |                              |
| 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20ther: Specify: 21. +\$ 22. \$ 3,727.0  The result is your monthly expenses.  Calculate your monthly net income.   | Other    | r real property     | expenses not included in lines 4 or 5 of this form or on S   | Schedule I: Y | our Income.    |                              |
| 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$  Cour monthly expenses. Add lines 4 through 21.  The result is your monthly expenses.  Calculate your monthly net income.  | 20a.     | Mortgages on        | other property   | 20a.          | \$             | 0.00                         |
| 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$  Column 1  | 20b.     | Real estate ta      | es   | 20b.          | \$             | 0.00                         |
| 20e. Homeowner's association or condominium dues  20e. \$ 0  Chher: Specify: 21. +\$ 0  Your monthly expenses. Add lines 4 through 21. 22. \$ 1,727.0  The result is your monthly expenses.  Calculate your monthly net income.  |          |                     |  | 20c.          | \$             | 0.00                         |
| 20e. Homeowner's association or condominium dues  20e. \$ 0  Chher: Specify: 21. +\$ 0  Your monthly expenses. Add lines 4 through 21. 22. \$ 1,727.0  The result is your monthly expenses.  Calculate your monthly net income.  | 20d.     | Maintenance,        | epair, and upkeep expenses   | 20d.          | \$             | 0.00                         |
| Your monthly expenses. Add lines 4 through 21.  The result is your monthly expenses.  Calculate your monthly net income.   |          |                     |  | 20e.          | \$             | 0.00                         |
| Your monthly expenses. Add lines 4 through 21.  The result is your monthly expenses.  Calculate your monthly net income.   | Other    | r: Specify:         |  | 21.           | +\$            | 0.00                         |
| The result is your monthly expenses.  Calculate your monthly net income.   |          |                     |  |               | •              |                              |
| Calculate your monthly net income.   |          |                     | 3  | 22.           | \$             | 1,727.00                     |
|  |          | ,                   | , ,  |               |                |                              |
| 23a. Copy line 12 ( <i>your compined monthly income</i> ) from Schedule I. 23a. \$ <b>1.657</b>  |          |                     |  | 0.5           | •              |                              |
| · · · · · · · · · · · · · · · · · · ·  |          |                     |  |               |                | 1,657.91                     |
| 23b. Copy your monthly expenses from line 22 above. 23b\$  | 23b.     | Copy your mo        | thly expenses from line 22 above.  | 23b.          | -\$            | 1,727.00                     |
| 200 Cultivast variances the same and the sam   | 00 -     | Culpature - 1 · · · | and the land of th |               |                |                              |
| 23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income 23c. \$ -69   | 23C.     |                     |  | 23c           | \$             | -69.09                       |
| The result is your <i>monthly net income</i> .   |          | The result is )     | и топину нестисотте.   | 200.          | *              |                              |
| Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease becaus   | For exa  | kample, do you ex   | ect to finish paying for your car loan within the year or do you expect yo   |               |                | ase or decrease because of a |
| nodification to the terms of your mortgage?  |          |                     |  |               |                |                              |
| ■ No.  | ■ No     | 0.                  |  |               |                |                              |
| □ Yes.   |          |                     |  |               |                |                              |
| Explain:   |          |                     |  |               |                |                              |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 35 of 52

B6 Declaration (Official Form 6 - Declaration). (12/07)

## **United States Bankruptcy Court Northern District of Illinois**

| In re   | Marilyn Johnson                          |           |  | Case No. |   |  |  |
|---|--|-----------|--|----------|---|--|--|
|   | -  |           | Debtor(s)                                  | Chapter  | 7 |  |  |
|   | <b>DECLARATION C</b> DECLARATION UNDER F |           |  | CHEDULI  |   |  |  |
| I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief. |  |           |  |          |   |  |  |
| Date  | May 16, 2015                             | Signature | /s/ Marilyn Johnson Marilyn Johnson Debtor |          |   |  |  |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 36 of 52

B7 (Official Form 7) (04/13)

### **United States Bankruptcy Court Northern District of Illinois**

| In re | Marilyn Johnson | Case No.  |         |   |
|-------|-----------------|-----------|---------|---|
|       |                 | Debtor(s) | Chapter | 7 |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$10,597.16 2015 YTD: Employment Income \$25,820.00 2014: Employment Income \$31,010.00 2013: Employment Income

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$1,471.00 2013: Retirement Distribution

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 37 of 52

B7 (Official Form 7) (04/13)

2

## 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

#### Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 38 of 52

B7 (Official Form 7) (04/13)

## 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY** 

### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

## 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Zalutsky & Pinski, Ltd. 111 W. Washington **Suite 1550** Chicago, IL 60602

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 5/5/15

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

\$217.00

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 39 of 52

B7 (Official Form 7) (04/13)

1

### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

## 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

## 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Page 40 of 52 Document

B7 (Official Form 7) (04/13)

**ADDRESS** NAME USED DATES OF OCCUPANCY

Current Same 1/13- present 10026 S Indiana Same 7 years prior

## 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

DATE OF

NAME AND ADDRESS OF **ENVIRONMENTAL** SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

## 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

### Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 41 of 52

B7 (Official Form 7) (04/13)

None

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL

**BEGINNING AND** TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS NATURE OF BUSINESS **ENDING DATES** 

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME **ADDRESS**  Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 42 of 52

B7 (Official Form 7) (04/13)

7

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | May 16, 2015 | Signature | /s/ Marilyn Johnson |
|------|--------------|-----------|---------------------|
|      |              |           | Marilyn Johnson     |
|      |              |           | Debtor              |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 43 of 52

B8 (Form 8) (12/08)

## United States Bankruptcy Court Northern District of Illinois

|   | 1 (of the H B)                | strict or minions   |                                  |                                   |
|---|-------------------------------|---|----------------------------------|-----------------------------------|
| In re Marilyn Johnson   |                               |   | Case No.                         |                                   |
|   |                               | Debtor(s)   | Chapter                          | 7                                 |
|   | 7 INDIVIDUAL DEBT             |   |                                  |                                   |
| <b>PART A -</b> Debts secured by proper property of the estate. Att                         |                               |   | pleted for EAC                   | <b>H</b> debt which is secured by |
| Property No. 1  |                               |   |                                  |                                   |
| Creditor's Name: PRA Receivable Mgmt LLC  |                               | Describe Propert<br>2005 Chevy Equi                       |                                  | t:<br>00 miles and needs work     |
| Property will be (check one):   |                               |   |                                  |                                   |
| ☐ Surrendered   | ■ Retained                    |   |                                  |                                   |
| If retaining the property, I intend to (o ☐ Redeem the property ■ Reaffirm the debt         | check at least one):          |   |                                  |                                   |
| ■ Other. Explain Fair Market  | Value (for example avoid      | lien using 11 II S C                                      | 8 522(f))                        |                                   |
| -   | (for example, avoid           | nen using 11 o.s.c.                                       | 3 322(1)).                       |                                   |
| Property is (check one):  |                               | □ N. 4 . 1. ' 1   |                                  |                                   |
| ■ Claimed as Exempt   |                               | □ Not claimed as  | exempt                           |                                   |
| PART B - Personal property subject to<br>Attach additional pages if necessary.)             | o unexpired leases. (All thre | e columns of Part B                                       | must be complete                 | ed for each unexpired lease.      |
| Property No. 1  |                               |   |                                  |                                   |
| Lessor's Name:<br>-NONE-  | Describe Leased Pr            | operty:   | Lease will be U.S.C. § 365 ☐ YES | e Assumed pursuant to 11 5(p)(2): |
| I declare under penalty of perjury to personal property subject to an une Date May 16, 2015 |                               | intention as to any  /s/ Marilyn Johnson  Marilyn Johnson |                                  | estate securing a debt and/o      |
|   |                               | Debtor  |                                  |                                   |

Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 44 of 52

# **United States Bankruptcy Court Northern District of Illinois**

|       | INUI   | thern District of Hillon   | •  |                       |                    |
|-------|--|--|--|-----------------------|--------------------|
| In re | Marilyn Johnson  |  | Case No  |                       |                    |
|       |  | Debtor(s)  | Chapter  | _7                    |                    |
|       | DISCLOSURE OF COMPE  | NSATION OF ATTO  | RNEY FOR D   | EBTOR(S)              |                    |
| (     | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of   | ng of the petition in bankruptcy   | , or agreed to be pa   | id to me, for service |                    |
|       | For legal services, I have agreed to accept  |  | \$   | 217.00                |                    |
|       | Prior to the filing of this statement I have received.   |  |  | 217.00                |                    |
|       | Balance Due  |  |  | 0.00                  |                    |
| 2. 5  | <b>335.00</b> of the filing fee has been paid.   |  |  |                       |                    |
| 3.    | The source of the compensation paid to me was:   |  |  |                       |                    |
|       | ■ Debtor □ Other (specify):  |  |  |                       |                    |
| 4.    | The source of compensation to be paid to me is:  |  |  |                       |                    |
|       | ■ Debtor □ Other (specify):  |  |  |                       |                    |
| -     |  | e ea a   | 1 4  | 1 1 1                 |                    |
| 5.    | I have not agreed to share the above-disclosed comp  | ensation with any other person   | unless they are me   | mbers and associat    | es of my law firm. |
|       | ☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.   |  |  |                       | my law firm. A     |
| 5.    | n return for the above-disclosed fee, I have agreed to re  | ender legal service for all aspec  | ts of the bankruptcy   | case, including:      |                    |
| l     | <ul> <li>Analysis of the debtor's financial situation, and render</li> <li>Preparation and filing of any petition, schedules, stat</li> <li>Representation of the debtor at the meeting of creditor</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on ho</li> </ul> | ement of affairs and plan which<br>ors and confirmation hearing, a<br>reduce to market value; ex<br>ons as needed; preparation | n may be required;<br>nd any adjourned he<br>emption plannin | earings thereof;      | and filing of      |
|       | Outside counsel may be employed unde   | er firm supervision, and pa  | id by our firm.  |                       |                    |
| 7. ]  | By agreement with the debtor(s), the above-disclosed fee<br>Representation of the debtors in any dis   |  |  | ry proceeding.        |                    |
|       |  | CERTIFICATION  |  |                       |                    |
|       | certify that the foregoing is a complete statement of any ankruptcy proceeding.  | y agreement or arrangement for   | payment to me for  | representation of     | the debtor(s) in   |
| Dated | May 16, 2015   | /s/ Thomas P Tw<br>Thomas P Twom<br>Zalutsky & Pinsk<br>111 W. Washingt<br>Suite 1550<br>Chicago, IL 6060<br>312-782-9792      | ey 6273191<br>i, Ltd.<br>on<br>2                             |                       |                    |

admin@ZAPLawFirm.com

## PRE-PETITION CHAPTER 7 RETAINER AGREEMENT

, herein referred to as the Debtor(s) agree(s) to retain the law firm of Zalutsky & Pinski, Ltd., for the limited purpose of providing legal service related to an including; providing an evaluation of the undersigned's financial situation and an explanation of available options, including Chapter 13. After which Zalutsky & Pinski, Ltd., agreed to prepare and file Debtor(s)' petition and/or schedules with the Clerk of the Bankruptcy Court. In addition to the legal services provided, Zalutsky & Pinski, Ltd., agrees to obtain a credit report on behalf of the Debtor(s) as well as assist in the procurement of mandatory credit counseling. Zalutsky & Pinski, Ltd.'s representation is completed and any and all agreements, including but not limited to this one are terminated upon the filing of Debtor(s)' Bankruptcy petition and/or schedules.

It is also understood that both Debtor(s) and Zalutsky & Pinski, Ltd., enter this agreement with the intention that upon the completion/termination of services contracted for under this agreement, Debtor(s) will enter into a second retainer agreement with Zalutsky & Pinski, Ltd., for post-filing bankruptcy related services. It is understood that neither Debtor(s) nor Zalutsky & Pinski, Ltd., are under any further obligation to each other once the services contemplated under this agreement have been terminated and/or the Bankruptcy petition has been filed with the Court. Debtor(s) retains the ability to represent himself or is free to obtain other representation for services to be rendered subsequent to the filing of the Chapter 7 petition. If Debtor(s) intend(s) to have Zalutsky & Pinski, Ltd., as their legal representative subsequent to the petition being filed, an additional retainer agreement must be entered into at that time.

It is further understood that any funds received by Zalutsky & Pinski, Ltd., in excess of the initial pre-filing retainer \$\_\_\_\_\_\_\_, shall be held by the firm with the understanding that these funds are to be applied to Debtor(s)' fees for post-petition services should Debtor(s) opt to retain Zalutsky & Pinski, Ltd. In the event that Debtor(s) does not elect to retain Zalutsky & Pinski, Ltd., after the termination of this agreement, or Debtor(s) expressly requests that those funds paid in excess be returned, then Zalutsky & Pinski, Ltd., agrees to refund all funds received in excess of the amount listed in this prepetition retainer agreement.

Debtor

X

Joint Debtor

Date

Dete

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

## 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

## Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

## Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 47 of 52

Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Case 15-17391 Doc 1 Filed 05/16/15 Entered 05/16/15 11:26:35 Desc Main Document Page 48 of 52

B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court Northern District of Illinois**

| In re Marilyn Johnson Case No.   |                      |
|--|----------------------|
| Debtor(s) Chapter 7  |                      |
| CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)<br>UNDER § 342(b) OF THE BANKRUPTCY CODE   |                      |
| Certification of Debtor  I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) | a) of the Rankruntey |
| Code.  | of the Bankruptey    |
| Marilyn Johnson X /s/ Marilyn Johnson M  | May 16, 2015         |
| Printed Name(s) of Debtor(s)  Signature of Debtor  D   | Date                 |
| Case No. (if known) X  |                      |
| Signature of Joint Debtor (if any) D   | Date                 |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

## United States Bankruptcy Court Northern District of Illinois

|       |  | Northern District of Illinois             |                             |                |
|-------|--|---|-----------------------------|----------------|
| In re | Marilyn Johnson                            |   | Case No.                    |                |
|       |  | Debtor(s)                                 | Chapter 7                   |                |
|       | VE   | ERIFICATION OF CREDITOR M                 | IATRIX                      |                |
|       |  | Number of                                 | Creditors:                  | 28             |
|       | The above-named Debtor(s) (our) knowledge. | ) hereby verifies that the list of credit | tors is true and correct to | the best of my |
| Date: | May 16, 2015                               | /s/ Marilyn Johnson<br>Marilyn Johnson    |                             |                |

Americash Loans 880 Lee Street Suite 302 Des Plaines, IL 60016

Americredit P.O. Box 78143 Phoenix, AZ 85062-8143

Amerimark Premier 1515 S 21st St Clinton, IA 52732

AT&T P.O. Box 8212 Aurora, IL 60572-8212

Avon c/o Allied Data Corporation 13111 Westheimer, Suite 400 Houston, TX 77077-5547

Check N GO 8357 South Cottage Grove Chicago, IL 60619

City of Chicago Department of Revenue 121 N. LaSalle St. Rm. 107A Chicago, IL 60602

Comcast 1255 W North Ave Chicago, IL 60622-1562

Continental Finance Co. P.O. Box 11743 Wilmington, DE 19850-1743

Dr Leonards/carol Wrig 1515 S 21st St Clinton, IA 52732 First Bk Of De/contine 1608 Walnut Street Philadelphia, PA 19103

First Premeir Bank Post Office Box 5147 Bankruptcy Department Sioux Falls, SD 57117-5147

Ginnys/Swiss Colony Inc Attn: Bankruptcy 1112 7th Ave Monroe, WI 53566

Illinois Department of Employment Benefit Repayments P.O. Box 4385 Chicago, IL 60680-4385

JPMorgan Chase Tiburon Financial, L.L.C. P.O. Box 770 Boys Town, NE 68010-0770

Midland Credit Mgmt 8875 Aero Dr Ste 200 San Diego, CA 92123

Monterey Financial Svc Po Box 5199 Oceanside, CA 92052

People's Energy/ Gas Bankruptcy Department 130 East Randolph Drive Chicago, IL 60601

Peoples Gas Attention: Bankruptcy Department 130 E. Randolph 17th Floor Chicago, IL 60601

Portfolio Recoveries 120 Corporate Blvd Ste 1 Norfolk, VA 23502 PRA Receivable Mgmt LLC 10 Orchard. Ste 100 Lake Forest, CA 92630

Premier Bank Card Recievable Managment Ind P.O. Box 129 Thorofore, NJ 06068-0129

Quest Diagnostic 1355 Mittel Blvd Wood Dale, IL 60191

Radiological Physicians Ltd. Northwest Collectors 3601 Algonquin Rd Ste 23 Rolling Meadows, IL 60008

Rush University Medical Center 21238 Network Place Collections/ Bankruptcy Chicago, IL 60673-1212

Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161

Webbank/fingerhut Fres 6250 Ridgewood Road St Cloud, MN 56303

WOW P.O. Box 5715 Carol Stream, IL 60197-5715